



Human Resources Division
500 Castro Street, P.O. Box 7540
Mountain View, CA 94039-7540
FAX 650-962-8505
www.mountainview.gov

EMPLOYMENT APPLICATION

- PLEASE NOTE:**
1. A separate application is required for each position.
 2. Applications must be typed or printed in blue or black ink. Incomplete or illegible applications will not be considered.
 3. Keep the Human Resources Division informed of any changes to your contact information.

POSITION

Position applied for _____

Learned of this job opening through _____

BASIC INFORMATION

☐ Mr.

☐ Ms.

Last Name _____ First Name _____ Middle Name _____

E-Mail _____

Address _____ City _____ State _____ Zip Code _____

Are you over 18 years of age? ☐ Yes ☐ No If under 18, can you, after employment, submit a work permit? ☐ Yes ☐ No

Primary Phone (_____) _____ Secondary Phone (_____) _____

Driver's License _____ Driver's License State _____ Driver's License Class _____

Are you eligible to work in the United States? ☐ Yes ☐ No

Have you ever been employed by the City of Mountain View? ☐ Yes ☐ No

Are you related to anyone employed by the City of Mountain View? ☐ Yes ☐ No

If YES, provide name and relationship _____

EDUCATION

Highest Education: ☐ Some High School ☐ High School ☐ GED ☐ Some College ☐ College ☐ Post Graduate

High School/GED Attended _____ Location of HS/GED _____

College or University Attended _____ Location _____ Major _____

Units Completed _____ Unit Type (circle one) Semester/Quarter Degree(s) completed _____

Trade or Business School Attended _____ City/State _____ Course of study completed _____

List any specialized training which yielded certification, accreditation, license, special skills, or other relevant information _____

Clerical Skills: Typing WPM _____ Computer/other office equipment _____

WORK EXPERIENCE

Begin with your current or most recent experience. Please attach any supplemental information you think might be useful. However, be sure you fill out the application completely. RESUMÉS MAY BE ATTACHED BUT WILL NOT BE ACCEPTABLE AS A SUBSTITUTE FOR COMPLETING THIS SECTION.

Start Date ____/____/____ month year End Date ____/____/____ month year Total years/months _____ Hours/Week _____

Job Title _____ Monthly Salary: _____

Number employees supervised _____ Supervisor's name and title _____

Company Name _____ Phone (_____) _____

Address _____

Describe this work experience _____

Reason for leaving _____

Start Date ____/____/____ End Date ____/____/____ Total years/months ____ Hours/Week ____
month year month year

Job Title _____ Monthly Salary: _____

Number employees supervised ____ Supervisor's name and title _____

Company Name _____ Phone (____) _____

Address _____

Describe this work experience _____

Reason for leaving _____

Start Date ____/____/____ End Date ____/____/____ Total years/months ____ Hours/Week ____
month year month year

Job Title _____ Monthly Salary: _____

Number employees supervised ____ Supervisor's name and title _____

Company Name _____ Phone (____) _____

Address _____

Describe this work experience _____

Reason for leaving _____

AGREEMENT

READ CAREFULLY BEFORE SIGNING.

I hereby certify that all statements made in this application and any additional supporting documents are true and I authorize investigation of all matters contained in the application material. I agree and understand any misstatement or omission of material fact on this application will cause forfeiture on my part of all rights of employment with the City of Mountain View. I agree to furnish such proof of age, citizenship, licenses, and education, as may be requested, and to be fingerprinted/backgrounded. I further agree to submit to a complete medical examination, which may include drug testing, by a City physician as may be requested.

I understand that all offers of employment are conditioned upon satisfactory proof of identity and legal ability to work in the United States and that the City of Mountain View is legally required by the Federal Government to hire only U.S. citizens and aliens lawfully authorized to work in the United States.

I understand that it is the policy of the City of Mountain View to preserve the right to equal employment opportunity for all persons, including those with physical, mental, or sensory disabilities. Candidates that may require special assistance in any phase of the application or testing process should advise the Human Resources Division upon submittal of application.

Signature _____ Date _____

CITY OF MOUNTAIN VIEW HUMAN RESOURCES DIVISION

TO: All Job Applicants
FROM: Assistant City Manager
SUBJECT: ETHNIC IDENTITY FORM

Section 1233 of the California Government Code gives each applicant the opportunity to **voluntarily** indicate his/her ethnic identification with the submittal of an employment application. This form will be detached from the application prior to application review and kept in a separate file from the employment application.

This information requested is gathered and summarized for nondiscrimination statistical purposes only. It is unlawful to use this information to discriminate against or give preference to a person for hiring or promotion. Please **do not sign** this form.

DATE: _____ POSITION APPLIED FOR: _____

PLEASE CHOOSE ONE OF THE FOLLOWING:

I identify myself as:

- | | |
|---|---|
| A: Hispanic
(Mexican, Puerto Rican, Cuban,
Central or South American, or
Other Spanish culture or origin,
regardless of race) | D: Asian or Pacific Islander
(Japanese, Chinese, Filipino,
Korean, Samoan, or the Indian
Subcontinent) |
| B: White | E: American Indian/Alaskan Native |
| C: Black | F: Two or more races |

RACE: _____ SEX: _____ AGE: _____

For purposes of this report, the following categories will be used:

- A. The category "Hispanic": All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture of origin, regardless of race.
- B. The category "White" (not of Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- C. The category "Black" (not of Hispanic origin): All persons having origins in any of the Black racial groups of Africa.
- D. The category "Asian or Pacific Islander": All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
- E. The category "American Indian or Alaskan Native": All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- F. The category "Two or more races": All persons having origins in more than one race or ethnicity.